510(k) Summary for the Caspian OCT Spinal System

This 510(k) summary for the Caspian OCT Spinal System is provided as required per Section 513(i)(3) of the Food, Drug and Cosmetic Act.

1. Submitter:

K2M, Inc.

751 Miller Drive SE,

Suite F1

Leesburg, VA 20175

Date Prepared: 10/24/13

Contact Person:

Nancy Giezen K2M, Inc.

Telephone: 703-777-3155

2. Tradename:

Caspian OCT Spinal System

Common Name: .

Spinal Fixation System

Classification Name:

Spinal Interlaminal Fixation Orthosis (21CFR 888.3050)

Device Product Code:

KWP

Regulatory Class:

Class II

3. Predicate or legally marketed devices which are substantially equivalent:

- K2M Caspian OCT Spinal System (K101084)
- Medtronic Vertex (K052402)

4. Description of the device:

The Caspian OCT Spinal System is a top-loading, multiple component, posterior (occipital-cervical-thoracic) spinal fixation system. The purpose of this submission is to add the Occipital Anchor to the system.

Materials: The subject devices are manufactured from Ti6Al4V Eli per ASTM and ISO standards.

Function: The system functions as an adjunct to fusion to provide immobilization and stabilization of the posterior cervical and thoracic spine.

5. Intended Use:

The CASPIAN OCT / MESA Mini / DENALI Mini Spinal System is intended to provide stabilization as an adjunct to fusion of the cervical spine and occipito-cervico-thoracic junction (occiput-T3) when used with autograft or allograft and is indicated for the following:

- DDD (neck pain of discogenic origin with degeneration of the disc as confirmed by patient history and radiographic studies)
- Spondylolisthesis
- Spinal stenosis
- Fracture/dislocation
- Revision of previous cervical spine surgery
- Tumors
- Atlantoaxial fracture with instability
- Occipitocervical dislocation

The occipital bone screws are limited to occipital fixation only.

The rod and hook components are intended for use in the cervical/upper thoracic (C1-T3) spine. The pedicle screws are limited to placement in T1-T3 in treating thoracic conditions only. The pedicle screws are not intended to be placed in or treat conditions involving the cervical spine.

The CASPIAN OCT / MESA Mini / DENALI Mini System can also be linked to the Range Spinal System using the 3.5mm/5.5mm rod connectors or transitional rods.

6. Comparison of the technological characteristics of the device to predicate and legally marketed devices: The subject components were mechanically tested and performed equally to or better than the original Caspian OCT Spinal constructs in static compression, static torsion and dynamic compression in accordance with ASTM F2706. The constructs were also compared in biomechanical (cadaver) testing and the devices were found to perform substantially the same.

There are no significant differences between the Caspian OCT Spinal System and other systems currently being marketed which would adversely affect the use of the product. It is substantially equivalent to these other devices in design, function, material and intended use.



Food and Drug Administration 10903 New Hampshire Ävenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

July 1, 2014

K2M, Incorporated
Ms. Nancy Giezen
Manager, Regulatory Affairs
751 Miller Drive SE, Suite F1
Leesburg, Virginia 20175

Re: K133288

Trade/Device Name: Caspian OCT Spinal System

Regulation Number: 21 CFR 888.3050

Regulation Name: Spinal interlaminal fixation orthosis

Regulatory Class: Class II Product Code: KWP Dated: May 30, 2014 Received: June 2, 2014

Dear Ms. Giezen:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act): 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Ronald P. Jean -S for

Mark N. McIkerson
Director
Division of Orthopedic Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017

indications for Use	•	See PRA Statement below.
510(k) Number (if known))
K133288		
Device Name Caspian OCT Spinal System		
Indications for Use (Describe) The CASPIAN OCT/MESA Mini/DENALI Mini Spinal System fusion of the cervical spine and occipito-cervical-thoracic junction is indicated for the following:		
- DDD (neck pain of discogenic origin with degeneration of the studies); -Spondylolisthesis; -Spinal stenosis; -Fracture/dislocation; -Revision of previous cervical spine surgery; -Tumors; -Atlantoaxial fracture with instability; -Occipitocervical dislocation	e disc as confirmed by	patient history and radiographic
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The CASPIAN OCT/MESA Mini/Denali Mini System can also 3.5mm/5.5mm rod connectors or transitional rods.	be linked to the Ran	ge Spinal System using the
Type of Use (Select one or both, as applicable)		
Prescription Use (Part 21 CFR 801 Subpart D)	☐ Over-The-Count	ter Use (21 CFR 801 Subpart C)
PLEASE DO NOT WRITE BELOW THIS LINE - C	ONTINUE ON A SEP	ARATE PAGE IF NEEDED.
FOR FDA U	SE ONLY	
Concurrence of Center for Devices and Radiological Health (CDRH) (Signature)	
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Division of Orthopedic Devices		
Division of Orthope	Calo Dovido.	
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